

PUBLIC VOUCHER FOR PURCHASES &
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. _____
Bu. Vou. No. 2175

U. S. COST REIMBURSABLE

(Department, bureau, or establishment)

Voucher prepared at

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. _____

To

(Payee)

(Address)

(City)

(State)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Cost				6,248.	26
Use continuation sheet(s) if necessary							
Shipped from		to	Weight	Government B/L No.		Total	6,248.26

PAYMENT:

Complete ☐
Partial ☐
Final ☐

I certify that the above bill is correct and just and that payment has not been received.

STATOTHR

(Sign original only)

Date 7/31/58 *Payee

(Date not required when a like certificate is made by payee on attached bill or bills)

Per _____ Title _____

(Payee must NOT use this space)

Differences _____

Amount verified; correct for

(Signature or initials) EL

6,248.26

Contract No. A-101 Date _____ Req. No. _____ Date _____ Invoice Rec'd. _____

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ _____

† _____
(Authorized Certifying Officer)

By _____

SIGN
ORIGINAL
ONLY

Title _____

Title _____

Date _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ dated _____, 19____, for \$ _____ (on Treasurer of the United States in favor of payee named above.)
Cash, \$ _____, on _____, 19____ Payee _____
(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name must be written in the space provided for the signature of the person writing the company or corporate name, or "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Title _____

STATOTHR

Approved For Release 2002/06/10 : CIA-RDP64-00360R000600020056-3

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WEEKLY DET DISTR

Sheet
1/26/58

32 01 21 8

5035 43631

1 22 718

50 25 25 20 12501 5076 05 1

23274

23274 *

23274 **

23274 ***

Continued to Sheet 5

Sheet

WEEKLY DET DISTR

1/31/58

51 01 30 8

167 43465

2 21 233

50 25 25 20 ¹²⁵⁰¹ 12701 5076 11 1

500

500 *

500 **

500 ***

Continued to Sheet 5

ACCOUNTS PAYABLE

WEEKLY DET DISTR

DATE _____

2/25/58

FORM STL - 660

[illegible]

Continued to Sheet 5

ACCOUNTS PAYABLE

WEEKLY DET DISTR

DATE _____

[illegible]

Continued to Sheet 5

4/06/58

[illegible]